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FACSIMILE TRANSMISSION

DATE: March 29, 2005

TO: Office of Initial Patent Examination's
Filing Receipt Corrections

FAX NO.: (703)746-9195

FROM: Michael E. Carmen, Esq.
Dilworth & Barrese, LLP

RE: U.S. Serial No.: 10/766,248
Our Docket: 1276-4

NO. OF PAGES TO FOLLOW: 6

MESSAGE:

Attached is:

- 1) Request for Corrected Filing Receipt (in duplicate).
- 2) Copy of Filing Receipt with change noted.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Paruthi et al. Examiner: (Not Yet Assigned)
Serial No.: 10/766,248 Group: Art Unit 1615
Filed: February 27, 2004 Docket: 1276-4
For: TASTE MASKING PHARMACEUTICAL Dated: March 29, 2005
COMPOSITION AND PROCESS FOR ITS
PREPARATION

Office of Initial Patent Examination's
Filing Receipt Corrections
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P.O. Box 1450
Alexandria, VA 22313-1450

VIA FACSIMILE (703) 746-9195

REQUEST FOR CORRECTED FILING RECEIPT

Sir:

Attached is a copy of the official filing receipt received from the Patent and Trademark Office in the above application for which issuance of a corrected filing receipt is respectfully requested.

There is an error with respect to the following data:

Error in:**Correct data:**


Power of Attorney

Power of Attorney: 28249

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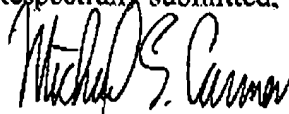
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dated: March 29, 2005


Bridget Griffin

Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 04-1121. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 04-1121 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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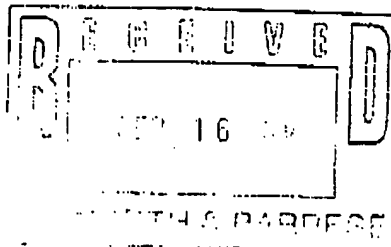


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APPL NO.	FILING OR 371 (a) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/766,248	01/27/2004	1615	1206	1276-4		37	2

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CONFIRMATION NO. 4167

UPDATED FILING RECEIPT

OC000000013796189

Date Mailed: 09/14/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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Power of Attorney: ~~None~~ 28249

Domestic Priority data as claimed by applicant

Foreign Applications

INDIA 131/MUM/2003 01/31/2003

If Required, Foreign Filing License Granted: 06/29/2004

The number of your priority application, to be used for filing abroad under the Paris Convention is,
US10/766,248

Projected Publication Date: 12/23/2004

Non-Publication Request: No

Early Publication Request: No

Title

Taste masking pharmaceutical composition and process for its preparation

Preliminary Class

424

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